ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TP		3-13-00
O.I.P.E. CLASSIFIER	M~r	5 '	3-10-00
FORMALITY REVIEW		71423	5-2-00
RESPONSE FORMALITY REVIEW		71423	5-17-00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

BEST AVAILABLE COPY

Claim (Final / Original)	Date	Claim (Final / Original)	Date	Claim (Final / Original)	Date
1		51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6 N		56		106	
7		57		107	
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9		59		109	
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12		62		112	
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34		84		134	
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37		87		137	
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41		91		141	
42		92		142	
43		93		143	
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45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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